



*Committed to Providing Exceptional Customer Service*

# OSIP Online Services Guide

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## Self Insured Group (SIG)

11050 Olson Drive, Suite 230 | Rancho Cordova, CA 95670 | Phone (916) 464-7000 | Fax (916) 464-7007

[OSIP@dir.ca.gov](mailto:OSIP@dir.ca.gov) | <http://www.dir.ca.gov/osip/>

Rev. 06/15

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# What is OSIP Online Services?

[OSIP Online Services](#) is where you can electronically submit a growing list of information to the [Office of Self Insurance Plans](#) (OSIP). Self Insured Groups (SIGs) will file Annual Reports, financial statements, core members, and select or change actuaries (one must be selected before your actuary can login to file the Actuarial Summary and Study).

Please see the [regulations](#) regarding self insurance plans and our **Forms, Publications, and Reports** page for [updated user guides](#).

Annual Due Dates			
	Private Employers	Self Insured Groups	Public Employers/ Joint Power Authorities
Annual Report	March 1 <sup>st</sup>	March 1 <sup>st</sup>	October 1 <sup>st</sup>
Actuarial Summary & Study	May 1 <sup>st</sup>	April 15 <sup>th</sup>	-
Financial Statement	Annually	March 1 <sup>st</sup> * / July 1 <sup>st</sup>	-
Core Member Financials	-	Annually	-

\* Unaudited

State of California  
Department of Industrial Relations

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Office of Self Insurance Plans (OSIP)

**Forms, Publications and Reports**

**Quick Links**

- OSIP Online Services
- Annual Report Login Screen
- Make a Payment
- Get information about self insurance and the requirements to self insure
- Apply to take the Self Insurance Administrator's examination
- Determine if an employer is self insured
- Determine if a person is a self insured administrator
- Frequently Asked Questions (FAQs)

**Related Links**

- Self-Insurers' Security Fund
- California Self Insurers' Association
- Self Insurance Institute of America
- California WC & Risk Conference

**About OSIP**

- About Us
- Contact
- OSIP site map

**OSIP Online Services**

Click on the OSIP Online button to log in and submit your filing requirement.

[Go to OSIP Online -](#)

**Self Insurance by the Numbers - 2013 Annual Report Statistics**

\$177 Billion total self-insured payroll  
4 Million CA Workers covered by self-insurance  
1 in 4 CA Workers is covered by self-insurance  
9,849 CA Employers are active self-insurers

[OSIP - AUDIT UNIT](#)

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Office of Self Insurance Plans (OSIP)

**Forms, Publications, and Reports**

**OSIP Online Services User Guides**

- Private Employer
- Self Insured Group
- Public Entity & Joint Power Authority (JPA)
- Third Party Administrator (TPA)
- Actuary

[Go to OSIP Online Services](#) [E-file my Annual Report](#)

**Information Bulletin**

- Informational Bulletin: Self Insurance Actuarial Data Analysis – 2013

**Fiscal Year**

- FY 2014/2015 Methodology
- FY 2013/2014 Methodology
- FY 2012/2013 Methodology
- FY 2011/2012 Methodology
- FY 2010/2011 Assessments

**Newsline**

**Quick Links**

- OSIP Online Services
- Annual Report Login Screen
- Make a Payment
- Get information about self insurance and the requirements to self insure
- Apply to take the Self Insurance Administrator's examination
- Determine if an employer is self insured
- Determine if a person is a self insured administrator
- Frequently Asked Questions (FAQs)

**Related Links**

- Self-Insurers' Security Fund
- California Self Insurers' Association
- Self Insurance Institute of America
- California WC & Risk Conference

**About OSIP**

- About Us

## E-filer vs. Correspondence Contact – who receives what?

❖ Update contact information or reset the password for a new employee by emailing [OSIP@dir.ca.gov](mailto:OSIP@dir.ca.gov).

### E-filer

Only one person at a time may have login credentials to e-file and can choose who will receive the completed Annual Report in a confirmation email.

New e-filers may choose their password by:

1. Emailing [OSIP@dir.ca.gov](mailto:OSIP@dir.ca.gov) for a temporary password
2. Creating a new password
3. Choosing a security question to reset the password if it is lost
4. Entering an email address (this does not need to be the e-filer's email address) to receive the completed Annual Report in a confirmation email. This email address will also receive a link to reset a lost password.

### Correspondence Contact

The person designated to receive correspondences on the first page of the Annual Report will receive:

- Announcements
- Notices
- Assessment invoices
- Security deposit and financial correspondences
- Inquiries (about submitted reports and in general)
- Submission confirmations, except for the Annual Report. These confirmations will not include copies of the submitted information.

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Go to Search

Department of Industrial Relations  
Home Labor Law Workplace Safety Workers' Comp Self Insurance Apprenticeship Director's Office Boards

Office of Self Insurance Plans (OSIP) Options

### Change Password and Setup Security Question

\* = Required Information

Current Password: \*

Type Your Password:  
(Password must have one digit, one letter, one of the following !@#\$%^&\*+= and have a length between 8 - 12 characters.)

New Password: \*

Retype Password: \*

Type A Secret Question To Reset Password: \*

Answer To Secret Question: \*

Email: \*

Clear Submit

### To Whom Should Correspondence Be Addressed For Security Deposit and Financial Matters?

First Name: \*  MI:  Last: \*  Position/Title:

Email Address: \*  Company Name: \*

Phone: \*  Fax:

Address 1: \*

City: \*  State: \* CA  ZIP: \*

Corporate Web Address:

Save & Close Save & Next

## Log-In to OSIP Online

Log-in at <https://efiling.dir.ca.gov/OSIPO/> and enter the same User ID and Password used to file your Annual Report. Your User ID is your four digit certificate number (please add leading zeroes if your certificate number is less than four digits). Answer the security question you chose to **retrieve your password**. You will receive a temporary password and link at the email address entered when the password was created. Click the link in the email and enter the temporary password to choose a new password.

Please email [OSIP@dir.ca.gov](mailto:OSIP@dir.ca.gov) if this is the first year you are e-filing anything for your SIG and request that the password and associated email address be reset.

To fill out the Annual Report either click on **Direct access to the Annual Report** or login to OSIP Online and be redirected to the existing Annual Report login page.

Internet Explorer (8 or higher), Chrome, Firefox, and Safari will allow full functionality of OSIP Online. Internet Explorer is the optimal browser for the Annual Report.

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Department of Industrial Relations

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▶ Welcome to OSIP Online Services

Thank you for visiting OSIP Online Services, the Office of Self Insurance Plans online tool. OSIP Online allows Self Insured Employers, Actuaries, Third Party Administrators and Group Administrators to file and submit their required documents online.

[First time users](mailto:OSIP@dir.ca.gov), please email [OSIP@dir.ca.gov](mailto:OSIP@dir.ca.gov) to receive a login user ID and password, or call OSIP at (916) 464-7000.

OSIP Online system requirements are: Internet Explorer (8 or higher), Chrome, Firefox and Safari.

[Self-Insurance Regulations](#)

[FAQs](#)

[User Manuals](#)

[Direct access to the Annual Report](#)

User ID

Password

Login

Forgot your password? Actuaries, please email [OSIP@dir.ca.gov](mailto:OSIP@dir.ca.gov). All others, please [retrieve your password](#) by answering the question you chose during registration.

**Annual Due Dates**

	Private Employers	Self Insured Groups	Public Employers/ Joint Power Authorities
Annual Report	March 1 <sup>st</sup>	March 1 <sup>st</sup>	October 1 <sup>st</sup>
Actuarial Summary & Study	May 1 <sup>st</sup>	April 15 <sup>th</sup>	-
Financial Statement	Annually	March 1 <sup>st</sup> * / July 1 <sup>st</sup>	-
Core Member Financials	-	Annually	-

\* Unaudited

## OSIP Online Main Menu

State of California  
Department of Industrial Relations

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Home | Labor Law | Cal/OSHA - Safety & Health | Workers' Comp | Self Insurance | Apprenticeship | Director's Office

### Self-Insurance Group (SIG) Menu Logout

I want to complete/file/submit:

- Annual Report**  
An annual report covering the preceding calendar year's events must be filed by you and your third party administrator (TPA) by March 1st.  
Former certificate holders must file a report as long as there are still claims open from the period of self-insurance. If your certificate has been revoked for three full years, please do not report the number of employees or wages.  
Please use Internet Explorer to access this site for full functionality.  
Questions or technical problems, Please contact (916) 464-7000.
- Financial Statement**  
Annually submit a current, certified, independently audited and unaudited financial statement complete with all notes and schedules.
- Core Member Data**  
Core group members do not have to be the same from year to year but together must meet or exceed regulatory minimums. Report all members in a single submission. Partial submissions will not be saved.
- Select/Change My Actuary**  
Select or change an actuary from the approved list. Once selected, the actuary will be able to submit the Actuarial Summary and Study.

## Menu Options:

### Annual Report

This will bring you to the same Annual Report login page used in previous years. Use Internet Explorer 8 or higher.

- Due date - March 1<sup>st</sup>

### Financial Statement

Submit your current, certified, independently audited and unaudited financial statements. Please include all notes and schedules.

- Audited Financial Statements due - July 1<sup>st</sup>
- Unaudited Financial Statements due - March 1<sup>st</sup>

### Core Member Data

Enter up to ten core members. Partial entries will not be saved.

### Select/Change My Actuary

Select an actuary who has registered with OSIP. Your actuary can only submit the Actuarial Summary and Study after you select them.

- Due date - April 15<sup>th</sup>

## Core Member Requirements

Core group members must be reported every year and together must fall within one of the options below. They do not have to be the same members from year to year, but they all need to be reported at the same time. Partial submissions will not be saved.

Regulatory details may be found in [§15472](#) and [§15484](#) of the California Code of Regulations, Title 8.

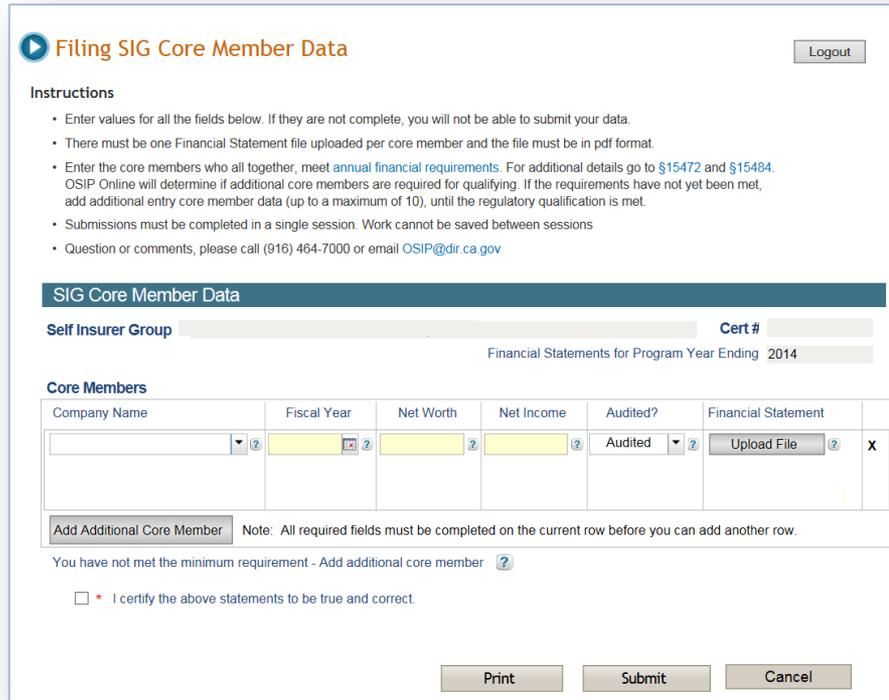
The aggregate net worth and net earnings of the core members must fall within one of the following three ranges (figures must be documented in certified and independently audited financial statements).

	Minimum Net Worth	Minimum Net Income
<b>Option 1</b>	\$5 million (audited)	\$500,000
<b>Option 2</b>	\$10 million (audited)	\$0
<b>Option 3</b>	\$15 million* (reviewed)	\$0

\* With independent CPA reviewed financial statements with the reviewer's report attached, or if the qualifying core group members consist, in whole or in part, of IRS Subchapter S-corporations as documented by certified and independent CPA reviewed financial statements with the reviewer's reports included with each statement.

## File Core Members

1. From the main menu, choose **Core Member Data**. Enter all core members in the same session, partial information will not be saved.
2. Your group name and certificate number will appear, please make sure it is correct.
3. Fill out the **Core Members** section:
  - a. Choose a core member **Company Name** by clicking  and selecting a core member from the drop down list.
  - b. Enter the **Fiscal Year**, **Net Worth**, **Net Income**, and if the financial statement is **Audited** or **Reviewed**. Click **Upload File** to attach a PDF version of your financial statement, there is no file size limit.  
-Hover over  for more information on entry requirements.
  - c. Remove a core member by clicking on **X** at the end of the row.
  - d. Add up to ten members by clicking on **Add Additional Core Member**. Below this, a message will tell you if you the financial requirements have been met yet.
  - e. Check off the box to certify your statements are true and correct.
4. Review your entries, then **Print** the form for your records. The information entered will not be saved if **Cancel** is clicked.
5. Click **Submit** when ready. The person entered on the Annual Report as the correspondence person for financial matters will receive a submission confirmation email, without copies of the uploaded financial statements. Email [OSIP@dir.ca.gov](mailto:OSIP@dir.ca.gov) to change the correspondence person.



**Filing SIG Core Member Data** Logout

**Instructions**

- Enter values for all the fields below. If they are not complete, you will not be able to submit your data.
- There must be one Financial Statement file uploaded per core member and the file must be in pdf format.
- Enter the core members who all together, meet [annual financial requirements](#). For additional details go to [§15472](#) and [§15484](#). OSIP Online will determine if additional core members are required for qualifying. If the requirements have not yet been met, add additional entry core member data (up to a maximum of 10), until the regulatory qualification is met.
- Submissions must be completed in a single session. Work cannot be saved between sessions
- Question or comments, please call (916) 464-7000 or email [OSIP@dir.ca.gov](mailto:OSIP@dir.ca.gov)

**SIG Core Member Data**

**Self Insurer Group**  **Cert #**

Financial Statements for Program Year Ending 2014

**Core Members**

Company Name	Fiscal Year	Net Worth	Net Income	Audited?	Financial Statement	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Audited <input type="text"/>	<input type="button" value="Upload File"/>	<input type="button" value="X"/>

Note: All required fields must be completed on the current row before you can add another row.

You have not met the minimum requirement - Add additional core member 

\* I certify the above statements to be true and correct.

# Financial Statements

State of California  
Department of Industrial Relations

Home | Labor Law | Cal/OSHA - Safety & Health | Workers' Comp | Self Insurance | Apprenticeship | Director's Office | Boards

**Filing SIG Financial Statement** Logout

**Instruction**

- Please complete the \* items below. If these fields are not complete, you will not be able to submit your data.
- Make sure your financial statement that you attach includes exhibits indicating specific amounts collected as group member contributions and earned from investments, as well as specific amounts for the year reported for the fields listed below.
- Your financial statement must be a certified, independently audited financial statement complete with all notes and schedules and be prepared according to Generally Accepted Auditing Principals (GAAP) and submitted by July 1 following the end of the program year.
- You are required to submit annually the group's un-audited financial statement by March 1.

**SIG Financial Statement**

Self Insurer Group  Cert #

Un-audited Report  Audited Report \* Financial Statement for Program Year Ending

**BALANCE SHEETS**

**ASSETS**

Cash & Cash Equivalents: *	<input type="text"/>
Investments: *	<input type="text"/>
Contribution Receivable: *	<input type="text"/>
All Other Assets: *	<input type="text"/>
<b>Total Assets:</b>	NaN

**LIABILITIES**

Estimated Unpaid Claims: *	<input type="text"/>
All Other Liabilities: *	<input type="text"/>
<b>Total Liabilities:</b>	NaN
Member Surplus (Deficit):	NaN
<b>Total Liabilities and Member Surplus/Deficit</b>	NaN

**INCOME STATEMENT**

**REVENUE**

Contributions *	<input type="text"/>
All Other Income: *	<input type="text"/>
<b>Total Income:</b>	NaN

**EXPENSES**

Group Administrator Fees: *	<input type="text"/>
Broker/Marketing Fees: *	<input type="text"/>
TPA Fees: *	<input type="text"/>
Excess Insurance: *	<input type="text"/>
Prem. for Errors/Omi cover.: *	<input type="text"/>
Deposit Related Costs: *	<input type="text"/>
Actuary Fees: *	<input type="text"/>
Accountant Fees: *	<input type="text"/>
Regulatory Costs: *	<input type="text"/>
Taxes: *	<input type="text"/>
Other Expenses: *	<input type="text"/>
<b>Total Expenses:</b>	NaN
<b>Net Income/Loss</b>	NaN

\* I certify the above statements to be true and correct.

## Annually Submit Per [§15484. Continuing Financial Capacity](#) both:

1. Audited Report- current, certified, independently audited financial statement complete with all notes and schedules and prepared according to Generally Accepted Auditing Principals (GAAP) by July 1<sup>st</sup> following the end of the program year and;
2. Unaudited financial statements by March 1<sup>st</sup> each year.

## Filing Online

1. Ensure the pre-populated **Self Insurer Group** name and **Cert #** are correct. Complete all fields with marked with an asterisk (\*).
2. Click **Upload File** and attach a PDF copy of the statement. Include exhibits indicating the amounts entered in the form. Email [OSIP@dir.ca.gov](mailto:OSIP@dir.ca.gov) if the attachment is larger than 15MB.
3. Check the box to certify that the entries are true and correct.
4. Click **Print** to keep a copy of this form for your records. The attached report will not print.
5. The **Cancel** button will take you back to the Main Menu. Information entered on the form ***will not be saved*** to complete later.
6. The **Submit** button will send the completed form and attachment to OSIP and Security Fund. A confirmation screen will appear and the correspondence person entered on the Annual Report will receive a confirmation email, ***without*** the completed form or statement attached.

## Selecting/Changing Your Actuary

Select or change your actuary so they can file your Actuarial Summary and Study. The summary and study are not required if the most recently filed Annual Report had either 10 or less open claims or less than \$1,000,000 of total estimated future liabilities (see line 8 of your Annual Report). [Actuarial Summary and Study Regulations](#)

Your current actuary, if you have one, will be shown in the **Current Actuary Information** section.

An actuary only needs to be selected in the **Actuary Information** section if the section above it has **N/A**, or if a different actuary will be conducting the study this year. If you cannot find your actuary, they may have to register with OSIP by emailing [OSIP@dir.ca.gov](mailto:OSIP@dir.ca.gov).

Print a copy for your records, then click **Submit**. The correspondence person entered on the Annual Report, the new actuary, and the former actuary will receive email confirmations of the change. Your correspondence person will also receive an email confirmation (without a copy of the study) after it is filed by your actuary. Security Fund will also be notified and provided with a copy of the study.

**Selecting/Changing Actuary** Logout

**Instructions:**

- Private and group self insurers are not required to file an actuarial study or actuarial summary in years when their current year filed Self Insurer's Annual Report reports either: (A) 10 or fewer open claims, or (B) less than \$1,000,000 of total estimated future liabilities.
- The top section displays your current Actuary, or "NONE" (or "NA") if OSIP does not have one for you on record.
- The bottom section is where you select your new, or change your current Actuary, or "NONE" if you will not have one for the foreseeable future. **Please note:** you must have an Actuary selected in order to submit an Actuarial Summary and Study.
- Question or comments, please email [OSIP@dir.ca.gov](mailto:OSIP@dir.ca.gov), or call (916) 464-7000.

**Select Actuary**

Cert #  Self Insurer

**Current Actuary Information**

Current Actuary	Actuary Firm		
N/A	N/A		
Actuary Title:	Designation(s):	Actuary Phone:	Actuary Email:
N/A	N/A	N/A	N/A

An actuary must be listed above in order for a study and summary to be submitted. Select or change your actuary below or click Cancel if no changes are needed.

**Actuary Information**

Select / Change Actuary:

Actuary Title:	Designation(s):	Actuary Phone:	Actuary Email:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

NOTE: If you have 10 or less open indemnity claims or less than \$1 million of total estimated future liability on your current annual report, you are not required to submit an actuarial summary or study.

Print Submit Cancel

**Annual Report** All self insured groups are required to file an Annual Report.

### Formerly Self Insured/Revoked Groups:

Continue to file Annual Reports until a final report has been submitted showing all claims have been closed and there are no remaining claims with the expectation of future liabilities. After the first full three calendar years of being revoked, please enter zero employees and wages. [Annual Report Regulations](#)

### Overall Process:

1. Log-in at <https://apps.dir.ca.gov/OSIP/>, click **Create Annual Report**, begin filling out the report, click **Save & Close**.
2. Let your TPA(s) know you have created the report so they can fill out their portion.
3. When they are finished you will see a checkmark by their name(s) on the first screen of your report. When all portions are complete you can submit them to OSIP by clicking **Submit**.
4. The email address entered when choosing your password will receive a confirmation email along with a PDF copy of the report, including the TPA portion.



## Annual Report Login Page

Login with the same Username and Password used last year/used to log into OSIP Online. Your User ID is your four digit certificate number (please add leading zeroes if your certificate number is less than four digits).

Select **Employer**, then click **Sign In**.

If you are self administered and need to fill out the Liabilities by Reporting Location portion, enter the same Username and Password, but select **TPA**.

Please call (916) 464-7000 or email [OSIP@dir.ca.gov](mailto:OSIP@dir.ca.gov) if this is the first year you are filing for your group so the password and email address that will receive submission confirmations with PDF copies can be reset.

If you forgot your password, please contact OSIP or reset the password by clicking **Forgot Password** and answering your security question. You will receive a temporary password and link at the email address entered when the password was created.

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State of California  
**Department of Industrial Relations**  
Go to Search

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Office of Self Insurance Plans (OSIP)  
Home | Login

Welcome

**dir** Department of Industrial Relations  
STATE OF CALIFORNIA  
OFFICE OF SELF INSURANCE PLANS

Welcome to the Office of Self Insurance Plans (OSIP) online application for filing your Private/Group Self Insurer's Annual Report which is due on March 1st, or the Public Self Insurer's Annual Report which is due October 1st. The completion and submission of this form is a requirement of Labor Code Section 3702.2 and California Code of Regulations, Title 8, Section 15251.

It is a requirement that your third party administrator(TPA) completes and submits their portion before the employer can submit the full annual report.

Please use Internet Explorer to access this site for full functionality.

Questions or technical problems, please contact (916) 464-7000.

v3.28

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**Sign In**

Username:  
Username x  
Password:

Employer  TPA

Remember me on this computer

Sign In

Forgot Password

First Time User

# Annual Report - Create a New Report

Click **Create Annual Report** to open a report for the preceding calendar year; for yourself and your TPA(s).

If you do not wish to fill out the report yet, click **Save & Close** at the bottom of the page. You can also begin filling it out and click **Save & Next** to continue through the three pages and eventually click **Save & Close**.

Let your TPA(s) know they can begin filling out the report you opened and saved.

It is alright if you opened an amended report in error as long as you do not click **Submit** on the last page of the report.

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Office of Self Insurance Plans (OSIP) Options

Welcome - [redacted] :

**Annual Reports** EMPLOYER

Create Annual Report

ID	Year	Type	Status	Function
1	2013	Annual	Submitted	Amend
2	2012	Annual	Submitted	

Function & Status Features From The Employer Menu Screen Are:

- **EDIT** - Under the Function Category this means that you will be able to Edit your Annual Report.
- **AMEND** - You can Amend your prior year's annual report for any discrepancies found. You will not be able to amend reports beyond the prior year.
- **SUBMITTED** - Your annual report has been submitted (once submitted the annual report cannot be modified).

v3.25

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To Whom Should Correspondence Be Addressed For Security Deposit and Financial Matters?

First Name: \* MI: Last: \* Position/Title:

Email Address: Company Name: \*

Phone: \* Fax:

Address 1: \*

City: \* State: \* ZIP: \*

Corporate Web Address:

Save & Close Save & Next

## Annual Report – Edit, Amend, or Logout

After saving the report you will be brought back to the Welcome screen listing the report year, type of report, submission status, and options to edit or amend reports from this year or last year.

Click on **Edit** to continue working on your report. Once a report is **Submitted** it cannot be modified and an amended report will have to be filed by clicking on **Amend** to make changes. After opening and saving an amended report, you and your TPA(s) will need to fill out the entire report again. Previous entries are not saved.

Logout by clicking on **Options**, then on **Logout**.

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State of California  
Department of Industrial Relations

Go to Search

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Office of Self Insurance Plans (OSIP)

Options  
Logout

Welcome - [Redacted]

Annual Reports EMPLOYER

ID	Year	Type	Status	Function
1	2014	Annual	Saved	Edit
2	2013	Annual	Submitted	Amend
3	2012	Annual	Submitted	

Function & Status Features From The Employer Menu Screen Are:

- **EDIT** - Under the Function Category this means that you will be able to Edit your Annual Report.
- **AMEND** - You can Amend your prior year's annual report for any discrepancies found. You will not be able to amend reports beyond the prior year.
- **SUBMITTED** - Your annual report has been submitted (once submitted the annual report cannot be modified).

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# Annual Report – Page 1

The top section is pre-populated, please review the information for correctness.

The report can only be submitted to OSIP after the box indicating the TPA has completed their portion is checked off.

The TPA listed would be incorrect if a *Report of Transfer of Records* was not filed by your prior TPA, which is required on the date of transfer. Also, you and your prior TPA should file an Interim Annual Report within 30 calendar days of the transfer.

If you click on **Add Subsidiary** all of the affiliates and/or subsidiaries entered will be pre-populated on your next report. You may also click on **Attach File** if you prefer to attach a PDF (include each of their states of incorporation and subsidiary/affiliate certificate numbers).

## Private Self Insurer's Annual Report

Annual Report Page 2 Page 3

### General Information

\* = Required Information

TPA	Completed
<input type="checkbox"/>	<input checked="" type="checkbox"/>

Certificate #:  Period of Report: Full Year

Period: \*  To: \*

Master Certificate Holder:

Name:

Address 1:

Address 2:

City:  State:  ZIP:

State of Incorporation:  FTIN:

List the names of ALL separate, but affiliated or subsidiary companies covered by this certificate.  
(Do not include DBA's or operating divisions):

[Add Subsidiary](#)

Attach a PDF document for affiliated or subsidiary companies. [Attach File](#)

## Annual Report – Page 1 Continued

### Number of Employees and Total wages and salaries paid:

- Enter what's reported to the Employment Development Department (EDD) on the *DE-6 Quarterly Report* or other similar EDD form used to report employment and wages for that calendar year.
- A part-time employee counts as one employee, two part-time employees do not count as one employee.
- If an entity became self insured in the middle of the calendar year, prorate the number of employees and wages.
- Enter "0" if this certificate has been revoked for three full calendar years.

The correspondence person entered for security deposit and financial matters will receive all correspondences and submission confirmation emails, except for the Annual Report confirmation. The email address entered when choosing your password will receive Annual Report confirmations. Click **Save & Next** to continue.

- ❖ An amended report is required to correct the number of employees and wages after the report is submitted.
- ❖ Correspondences will not be received if there is a typo on the correspondence's email address.

During the reporting period of this report, has there been any of the following with respect to the Master Certificate Holder or any subsidiary?

(a) Reincorporating	<input type="radio"/> Yes	<input checked="" type="radio"/> No
(b) Merger	<input type="radio"/> Yes	<input checked="" type="radio"/> No
(c) Change in Identity	<input type="radio"/> Yes	<input checked="" type="radio"/> No
(d) Any addition to Self Insurance Program	<input type="radio"/> Yes	<input checked="" type="radio"/> No

If yes, explain: \*

Employment and wages paid in current calendar year (If your certificate has been revoked for more than 3 calendar years then indicate zeroes for both.)

Number of Employees: \*

Total wages and salaries paid: \* \$

To Whom Should Correspondence Be Addressed For Security Deposit and Financial Matters?

First Name: \*  MI:  Last: \*  Position/Title:

Email Address: \*  Company Name: \*

Phone: \*  Fax:

Address 1: \*

City: \*  State: \*  ZIP: \*

Corporate Web Address:

## Annual Report – Page 2

### Record Storage

Choose **Yes** if any records are stored at a location other than with your current TPA and enter it on the window that will pop-up.

### Insurance Coverage

Add any standard, specific excess or aggregate (stop loss) workers' compensation policies for the current reporting period. Choosing **Yes** will pop-up new windows to enter details.

Click **Save & Next** to continue.

 **Private Self Insurer's Annual Report**

Annual Report > Page 2 > Page 3

#### Record Storage

1) Are Claim records stored at any location other than with the current administrator?  Yes  No

[Add Agency](#)

#### Insurance Coverage

1) Are any of your workers' compensation liabilities in California during the reporting period covered by a standard workers' compensation Insurance policy?  Yes  No

[Add Insurance](#)

2) Are any of your workers' compensation liabilities in California during the reporting period covered by a specific excess workers' compensations insurance policy?  Yes  No

Action	Insurance Company	Policy Number	Policy Issue Date	Retention Limit
<a href="#">Edit</a> <a href="#">Delete</a>				

[Add Insurance](#)

3) Do you carry an aggregate (stop loss) workers' compensation insurance policy?  Yes  No

[Add Insurance](#)

 Back  Save & Close  Save & Next

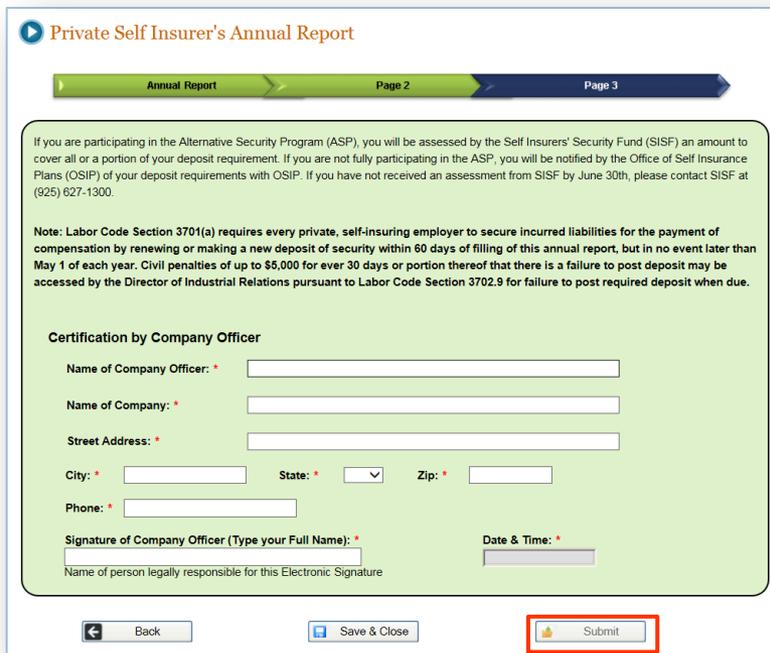
## Annual Report - Page 3

The Company Officer authorized on the Board Resolution must complete the section certifying the report is true, correct, and complete.

Review the report for accuracy. **Once submitted, the report cannot be modified and an amended report will have to be filed by you and your TPA(s) to make any changes.** Information entered on the original report will not be transferred to the amended report.

Click **Submit** when your report is finished. You will not be able to if the TPA has not clicked **Transmit**, the TPA completed box should be checked off on the first page of your report.

A pop-up window will give you the option to **Print and Submit** the report or to **Cancel** the submission, allowing further editing. The email address entered when you chose your password will be sent a confirmation of the submission with a PDF copy of the report, including the TPA portion.



**Private Self Insurer's Annual Report**

Annual Report Page 2 Page 3

If you are participating in the Alternative Security Program (ASP), you will be assessed by the Self Insurers' Security Fund (SISF) an amount to cover all or a portion of your deposit requirement. If you are not fully participating in the ASP, you will be notified by the Office of Self Insurance Plans (OSIP) of your deposit requirements with OSIP. If you have not received an assessment from SISF by June 30th, please contact SISF at (925) 627-1300.

Note: Labor Code Section 3701(a) requires every private, self-insuring employer to secure incurred liabilities for the payment of compensation by renewing or making a new deposit of security within 60 days of filing of this annual report, but in no event later than May 1 of each year. Civil penalties of up to \$5,000 for ever 30 days or portion thereof that there is a failure to post deposit may be accessed by the Director of Industrial Relations pursuant to Labor Code Section 3702.9 for failure to post required deposit when due.

**Certification by Company Officer**

Name of Company Officer: \*

Name of Company: \*

Street Address: \*

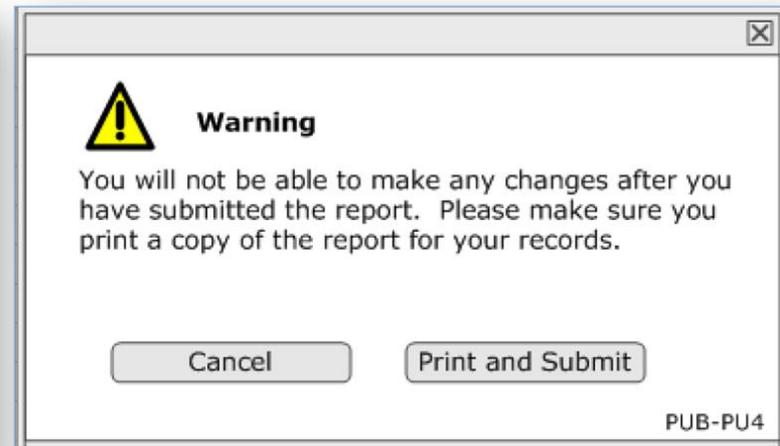
City: \*  State: \*  Zip: \*

Phone: \*

Signature of Company Officer (Type your Full Name): \*  Date & Time: \*

Name of person legally responsible for this Electronic Signature

Back Save & Close Submit

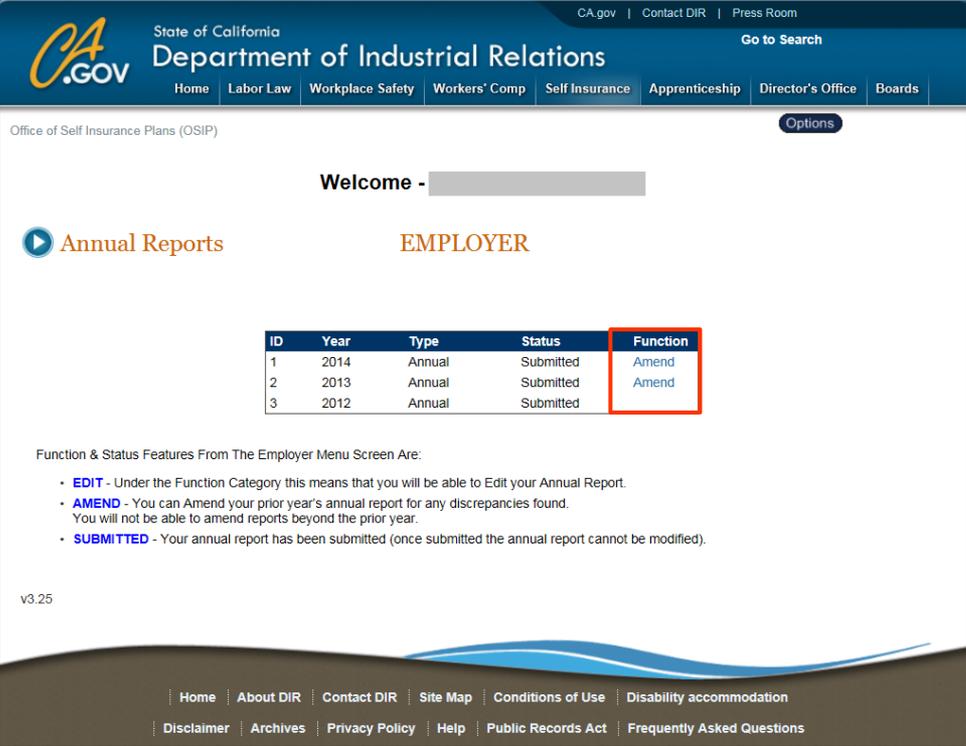


# Amending the Annual Report

You and each of your TPAs must fill out an amended report to correct information on the original submission.

Follow the same process to file an amended report:

1. Login at <https://apps.dir.ca.gov/OSIP/>, click **Amend**, begin filling out the report, click **Save & Close**.
2. Let your TPA(s) know you have created the report so they can fill out their portion.
3. When they are finished you will see a checkmark by their name(s) on the first screen of your report. When all portions are complete you can submit them to OSIP by clicking **Submit**.
4. The email address entered when choosing your password will receive a confirmation email along with a PDF copy of the report, including the TPA's portion.



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State of California  
**Department of Industrial Relations**

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Office of Self Insurance Plans (OSIP) Options

Welcome - [REDACTED]

[Annual Reports](#) **EMPLOYER**

ID	Year	Type	Status	Function
1	2014	Annual	Submitted	Amend
2	2013	Annual	Submitted	Amend
3	2012	Annual	Submitted	

Function & Status Features From The Employer Menu Screen Are:

- **EDIT** - Under the Function Category this means that you will be able to Edit your Annual Report.
- **AMEND** - You can Amend your prior year's annual report for any discrepancies found. You will not be able to amend reports beyond the prior year.
- **SUBMITTED** - Your annual report has been submitted (once submitted the annual report cannot be modified).

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## Interim Annual Reports

An Interim Annual Report is required within 30 calendar days of changing TPAs. On the date of transfer prior TPA(s) will also need to file with OSIP and the new TPA a *Report of Transfer of Records* containing:

1. A list of all open and closed claims for the self insurer in the possession of the former administrative agency as of the date of the transfer; and
2. A written description of the physical location of all claim files, the required claim logs, and any computer data files of the self insurer's plan. Physical location shall include claim files sent to storage and where stored; files sent to the self insurer; and files sent to the new administrator.
  - Except where specified in a contractual agreement between the self insurer and the former administrative agency, all claim files, claim logs and computerized data files shall be the property of the self insurer and shall be returned to the self insurer or delivered to the new administrator or administrative agency designated by the self insurer.
  - Failure of an administrative agency or self insurer to provide a Report of Transfer of Records as set forth in this section may be good cause for revocation of a certificate to administer.

### Create an Interim Annual Report:

1. The TPA will create the report by clicking **Create Interim Report**.
2. They will complete their portion and advise you that you can login to complete your portion and **Submit** the entire report.

### TPA Welcome Screen

Create Interim Report

ID	From Date	To Date	Type	Status	Function
1	01/01/2013	12/31/2013	Annual	SUBMITTED	
2	01/01/2012	12/31/2012	Annual	SUBMITTED	

### Employer Welcome Screen

ID	Year	Type	Status	Function
1	2014	Interim	Saved	New
2	2013	Annual	Submitted	Amend
3	2013	Interim	Saved	Edit
4	2012	Annual	Submitted	Amend